



Your benefit options

Coverage you can count on.
Group rates you can afford.





Short-term disability insurance

Keep getting a check when injury
or illness keeps you from work.





What is it?

Short-term disability insurance pays you a portion of your salary while you're away from work or recovering from a covered illness or injury.

Why is this coverage valuable?

When you're unable to collect your normal paycheck due to injury or illness, your disability policy provides money that can help you pay your bills.

Your short-term disability coverage

Eligibility description	All employees eligible for full, mid-level or core benefits not electing the voluntary short term disability plan
Contribution	Your employer pays the cost of your coverage
Coverage amount	55% of your weekly earnings to a maximum of \$800 per week
Maximum benefit period	24 weeks
Accident elimination period	15 days or exhaustion of accumulated sick leave (must exhaust 30 calendar days which equates to 22 working days not including paid holidays) or earnings cease
Illness elimination period	15 days or exhaustion of accumulated sick leave (must exhaust 30 calendar days which equates to 22 working days not including paid holidays) or earnings cease
Recurrent disability benefits	If you become disabled for the same condition within 4 weeks following your prior disability, your benefits will continue under the same claim
Evidence of insurability (EOI): A health statement requiring you to answer a few medical history questions.	Not applicable
Preexisting conditions: Any condition or symptom for which you, in the specified time period before coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	Not applicable



Exclusions, limitations, and reductions

Like any insurance, this short-term disability insurance policy does have exclusions. You won't receive benefits if:

- Your disability is the result of a self-inflicted injury or act of war
- Your disability occurs while you're committing a felony or misdemeanor, or participating in a riot

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

Your benefits may be reduced if you're eligible to receive income or benefits from:

- State disability or no-fault insurance
- A retirement plan
- Social Security
- Any form of employment
- Workers' compensation
- Salary continuance plan
- Sick leave
- State paid family leave benefits
- Any other group insurance plan
- Unemployment
- Recovery from third party

State variations apply.

©2024 Lincoln National Corporation

LincolnFinancial.com

Lincoln Financial® is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

LCN-6447206-030124

PDF 4/24 **Z01**

Order code: **GP-STDEP-FL1001**

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial® companies. Product availability and/or features may vary by state. Limitations and exclusions apply.



What is it?

Short-term disability insurance pays you a portion of your salary while you're away from work or recovering from a covered illness or injury.

Why is this coverage valuable?

When you're unable to collect your normal paycheck due to injury or illness, your disability policy provides money that can help you pay your bills.

Your short-term disability coverage

Eligibility description	All employees eligible for full, mid-level or core benefits electing the voluntary short term disability plan
Contribution	You pay the cost of your coverage
Coverage amount	60% of your weekly earnings to a maximum of \$15,000 per week
Maximum benefit period	24 weeks
Accident elimination period	15 days or exhaustion of accumulated sick leave (must exhaust 30 calendar days which equates to 22 working days not including paid holidays) or earnings cease
Illness elimination period	15 days or exhaustion of accumulated sick leave (must exhaust 30 calendar days which equates to 22 working days not including paid holidays) or earnings cease
Recurrent disability benefits	If you become disabled for the same condition within 4 weeks following your prior disability, your benefits will continue under the same claim
Evidence of insurability (EOI): A health statement requiring you to answer a few medical history questions.	Health statement may be required
Preexisting conditions: Any condition or symptom for which you, in the specified time period before coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	Not applicable
Premium waived if disabled: Premium won't need to be paid when you're receiving benefits.	Yes



Exclusions, limitations, and reductions

Like any insurance, this short-term disability insurance policy does have exclusions. You won't receive benefits if:

- Your disability is the result of a self-inflicted injury or act of war
- Your disability occurs while you're committing a felony or misdemeanor, or participating in a riot

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

Your benefits may be reduced if you're eligible to receive income or benefits from:

- State disability or no-fault insurance
- A retirement plan
- Social Security
- Any form of employment
- Workers' compensation
- Salary continuance plan
- Sick leave
- State paid family leave benefits
- Any other group insurance plan
- Unemployment
- Recovery from third party

State variations apply.

©2024 Lincoln National Corporation

LincolnFinancial.com

Lincoln Financial[®] is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

LCN-6447206-030124

PDF 4/24 201

Order code: GP-STDEP-FLI001

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the policy, the policy will govern.

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial[®] companies. Product availability and/or features may vary by state. Limitations and exclusions apply.



Long-term disability insurance

Make sure you can still pay your bills
if you're sidelined by injury or illness.





What is it?

Long-term disability insurance pays you a portion of your salary while you're away from work or recovering from a covered illness or injury.

Why is this coverage valuable?

When you're unable to collect your normal paycheck due to injury or illness, your disability policy provides money that can help you pay your bills.

Your long-term disability coverage

Eligibility description	Employees eligible for full benefits, mid-level benefits or core benefits electing voluntary long term disability																										
Contributions	You pay the cost of your coverage																										
Coverage amount	60% of your monthly earnings to a maximum of \$15,000 per month																										
Maximum benefit period	<p>Social Security Normal Retirement Age (SSNRA) or maximum benefit period outlined below, whichever is later:</p> <table> <thead> <tr> <th>Age at disability</th> <th>Maximum benefit period</th> </tr> </thead> <tbody> <tr> <td>Under 60</td> <td>To age 65 (but not less than five years)</td> </tr> <tr> <td>60</td> <td>60 months</td> </tr> <tr> <td>61</td> <td>48 months</td> </tr> <tr> <td>62</td> <td>42 months</td> </tr> <tr> <td>63</td> <td>36 months</td> </tr> <tr> <td>64</td> <td>30 months</td> </tr> <tr> <td>65</td> <td>24 months</td> </tr> <tr> <td>66</td> <td>21 months</td> </tr> <tr> <td>67</td> <td>18 months</td> </tr> <tr> <td>68</td> <td>15 months</td> </tr> <tr> <td>69+</td> <td>12 months</td> </tr> </tbody> </table>			Age at disability	Maximum benefit period	Under 60	To age 65 (but not less than five years)	60	60 months	61	48 months	62	42 months	63	36 months	64	30 months	65	24 months	66	21 months	67	18 months	68	15 months	69+	12 months
Age at disability	Maximum benefit period																										
Under 60	To age 65 (but not less than five years)																										
60	60 months																										
61	48 months																										
62	42 months																										
63	36 months																										
64	30 months																										
65	24 months																										
66	21 months																										
67	18 months																										
68	15 months																										
69+	12 months																										
Elimination period	After the end of your short-term disability or a period of 182 days of disability, whichever is greater																										
Evidence of insurability (EOI): A health statement requiring you to answer a few medical history questions.	Health statement may be required																										
Preexisting condition(s): Any condition or symptom for which you, in the specified time period before coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	3 months lookback; 12 months after effective date of coverage																										
Premium waived if disabled: Premium won't need to be paid when you're receiving benefits.	Yes																										
EmployeeConnectSM services: Gives you and your family confidential access to counselors, along with personal, legal, and financial assistance.	Included																										



Exclusions, limitations, and reductions

Like any insurance, this long-term disability insurance policy does have some exclusions. You won't receive benefits if:

- Your disability is the result of a self-inflicted injury or act of war
- Your disability occurs while you're committing a felony or misdemeanor, or participating in a riot
- Your disability occurs while you're imprisoned for committing a felony

Your benefits may be reduced if you're eligible to receive benefits from:

- A state disability plan or similar compulsory benefit act or law
- A retirement plan
- Social Security
- Any form of employment
- Workers' compensation
- Salary continuance
- Sick leave

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

©2024 Lincoln National Corporation

LincolnFinancial.com

Lincoln Financial® is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

LCN-6459796-030624

PDF 5/24 Z01

Order code: GP-LTDEP-FLI001

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the contract, the contract will govern.

EmployeeConnectSM services are provided by ComPsych® Corporation, Chicago, IL. ComPsych® and GuidanceResources® are registered trademarks of ComPsych® Corporation. ComPsych® is not a Lincoln Financial® company. Coverage is subject to actual contract language. Each independent company is solely responsible for its own obligations. **Not available in Washington. For New York, legal and financial assistance is not available.**

Insurance products are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN, which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York, Syracuse, NY. Both are Lincoln Financial® companies. Product availability and/or features may vary by state. Limitations and exclusions apply.



FREQUENTLY ASKED QUESTIONS

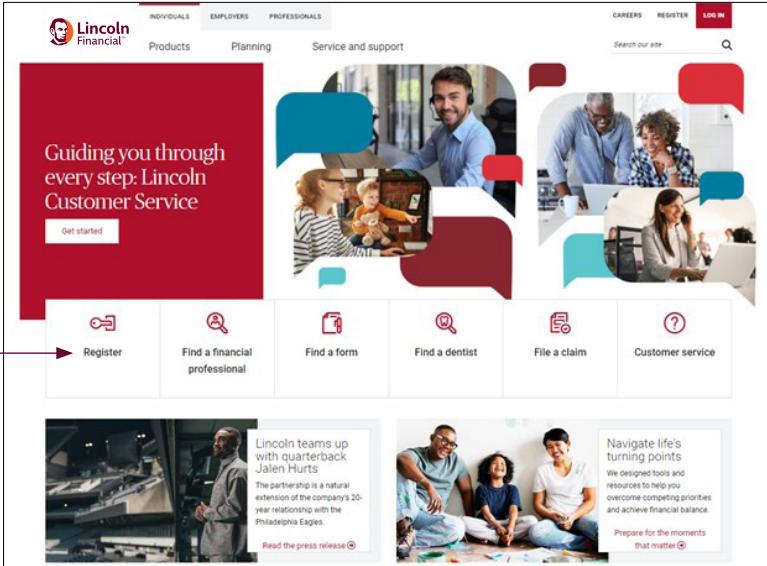
- **What is the registration code for MyLincolnPortal (MLP)?**
 - First-time users of MLP will need to register using the company code: **UNIVERSITY**
- **What is the difference between Basic Short-Term Disability (STD) Insurance and Voluntary Short-Term Disability Insurance?**
 - Basic STD Insurance is paid for by your employer. It offers a cash benefit of 55% of your weekly salary when you are out of work for up to 24 weeks due to injury, illness, surgery, or recovery from childbirth. The maximum monthly benefit is \$800.
 - Voluntary STD Insurance requires employee contributions and increases the cash benefit to 60% of your weekly salary when you are out of work for up to 24 weeks due to injury, illness, surgery, or recovery from childbirth. The maximum monthly benefit is \$15,000.
 - For more information, please review the Basic and Voluntary Benefit Summaries located under Documents.
- **Is disability insurance available for my family?**
 - No, disability coverage is only available to you as an employee as it provides income replacement for your earnings through UC.
- **Do I have to enroll in Voluntary Short or Long-Term Disability?**
 - No, Voluntary plans are optional. You will have the option to enroll in each plan separately. You are auto-enrolled in the employer-paid basic STD plan but not the employee-funded plans.
- **Can I enroll for Disability in the UCPATH Enrollment portal during Open Enrollment?**
 - No. You cannot enroll in UC's Voluntary Short-Term or Long-Term Disability Insurance plans through the **Open Enrollment Event** in the UCPATH system. However, you can apply for coverage at **any time** by submitting an online Evidence of Insurability Application to the insurer, Lincoln Financial.
- **How do I enroll in the Voluntary Short or Long-Term Disability plans?**
 - To confirm your disability coverage or to request changes to your disability coverage enrollment, please contact the UCPATH Center at 855-982-7284.
 - For first time enrollees, you will need to follow the instructions on the next page to complete the application on the Lincoln Financial website. A current or pre-existing condition may affect your application, and approval is not guaranteed.
 - Lincoln will review your application and send you a notification with their approval or denial decision.
 - If approved, their notification will include instructions for reporting your approved application to the UCPATH Center and requesting enrollment in UC's Voluntary Disability Plan(s).
 - UCPATH will process your enrollment and send you a confirmation when completed.

Access the account information you need — anytime, anywhere on LincolnFinancial.com

Need to submit or view the status of a claim, access forms, or upload documents? Sign up for your online Lincoln account for secure and convenient access. It's easy to find essential information, resources, tools, and more. Here's how to register:

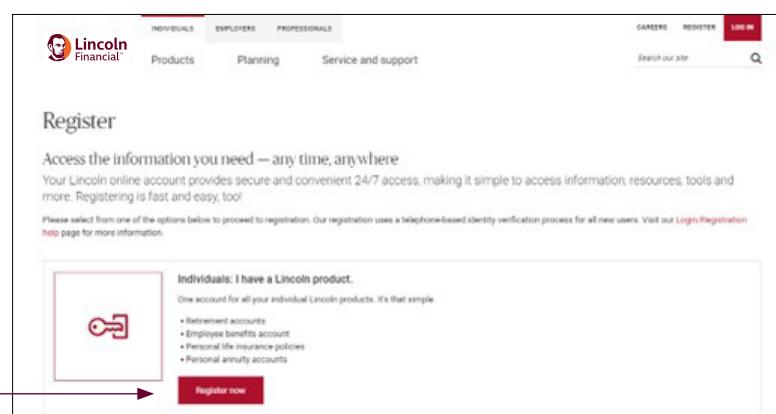


1. Visit [LincolnFinancial.com](https://www.lincolnfinancial.com) and select **REGISTER**.



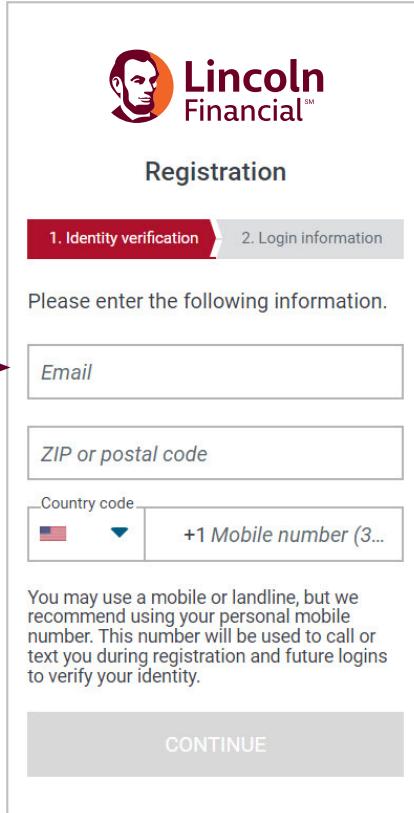
The LincolnFinancial.com homepage features a prominent 'REGISTER' button in the top right corner. The page is filled with various service icons and promotional images related to customer service, financial planning, and life events.

2. Choose **Register now**.



The 'Register' page on LincolnFinancial.com provides a step-by-step registration process. It starts with a question about having a Lincoln product, followed by a list of product types and a 'Register now' button.

3. Enter the requested information. You can add a cellphone or landline, but we recommend using your personal cellphone. This number will be used to text or call you during registration and for future logins to verify your identity.

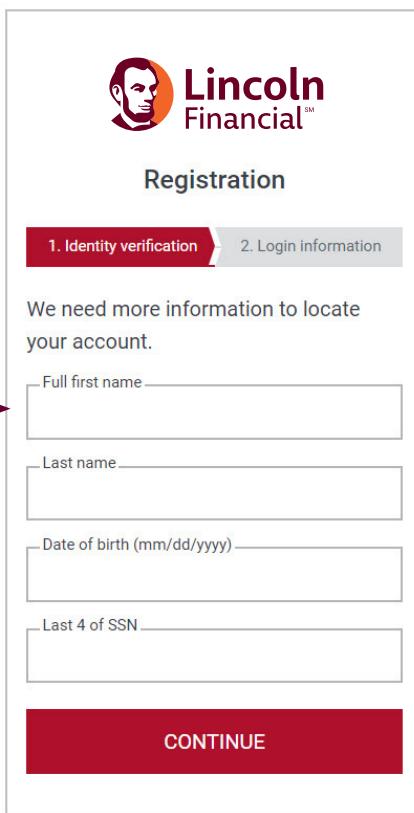


The screenshot shows the 'Identity verification' step of the Lincoln Financial registration process. At the top, the Lincoln Financial logo is displayed. Below it, the word 'Registration' is centered. A navigation bar at the top right shows '1. Identity verification' (highlighted in red) and '2. Login information'. The main area is titled 'Please enter the following information.' and contains four input fields: 'Email', 'ZIP or postal code', 'Country code' (with a dropdown menu showing 'USA'), and '+1 Mobile number (3...)'.

You may use a mobile or landline, but we recommend using your personal mobile number. This number will be used to call or text you during registration and future logins to verify your identity.

CONTINUE

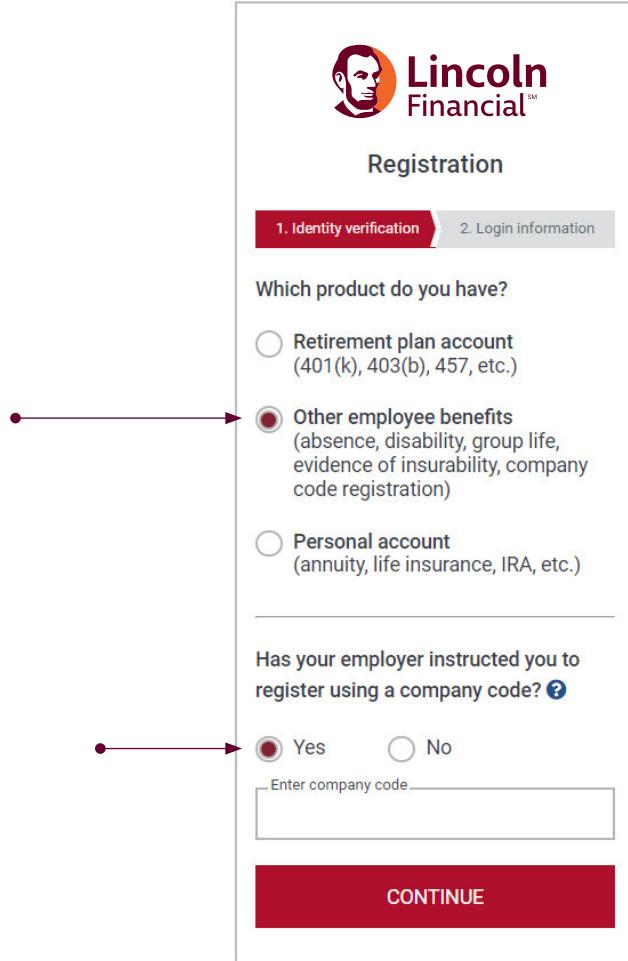
4. Enter your name, birthdate, and the last four digits of your Social Security number.



The screenshot shows the 'Login information' step of the Lincoln Financial registration process. At the top, the Lincoln Financial logo is displayed. Below it, the word 'Registration' is centered. A navigation bar at the top right shows '1. Identity verification' (highlighted in red) and '2. Login information'. The main area is titled 'We need more information to locate your account.' and contains four input fields: 'Full first name', 'Last name', 'Date of birth (mm/dd/yyyy)', and 'Last 4 of SSN'. A large red 'CONTINUE' button is located at the bottom.

5. If prompted, select **Other employee benefits**.

Select Yes and enter UNIVERSITY'.



Lincoln FinancialSM

Registration

1. Identity verification 2. Login information

Which product do you have?

Retirement plan account (401(k), 403(b), 457, etc.)

Other employee benefits (absence, disability, group life, evidence of insurability, company code registration)

Personal account (annuity, life insurance, IRA, etc.)

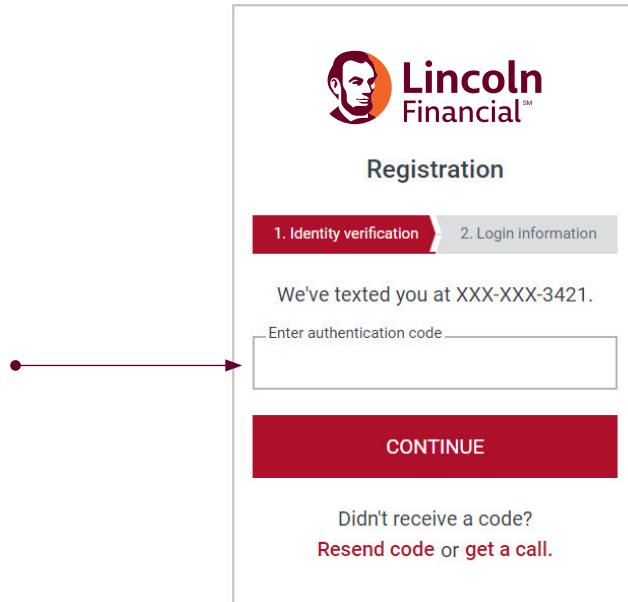
Has your employer instructed you to register using a company code? [?](#)

Yes No

Enter company code: _____

CONTINUE

6. You'll receive an authentication code via text.
Enter the code in the space provided.



Lincoln FinancialSM

Registration

1. Identity verification 2. Login information

We've texted you at XXX-XXX-3421.

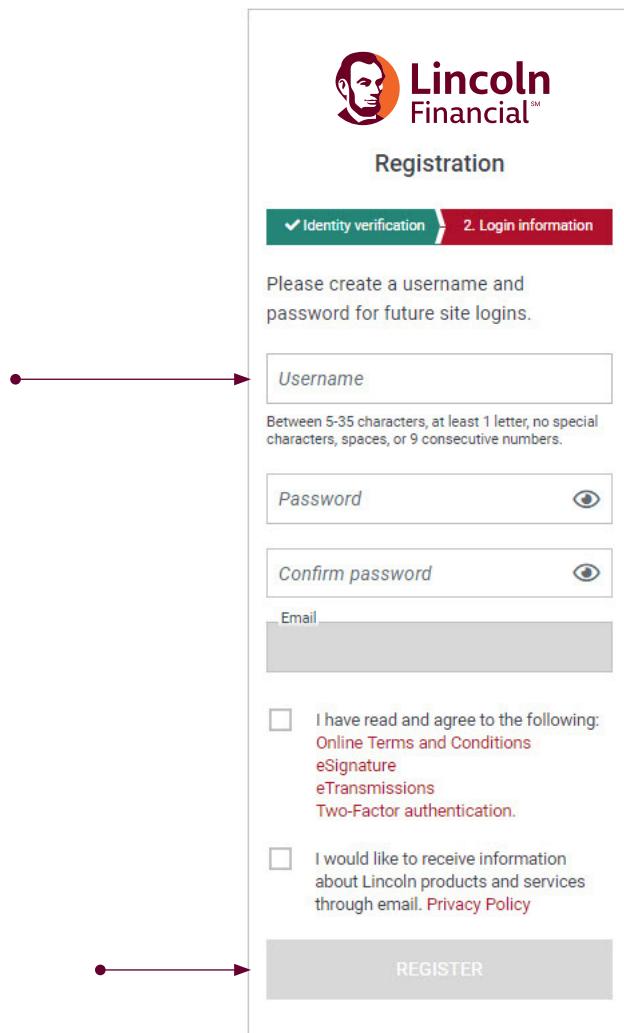
Enter authentication code: _____

CONTINUE

Didn't receive a code?
[Resend code](#) or [get a call](#).

7. Enter a username and a password. Confirm the password, read and agree to the information displayed, then check the box. If you'd like to receive more information about products and services from Lincoln, check that box too.

Select **REGISTER**. You'll then receive a confirmation message.



Registration

✓ Identity verification 2. Login information

Please create a username and password for future site logins.

Username

Between 5-35 characters, at least 1 letter, no special characters, spaces, or 9 consecutive numbers.

Password

Confirm password

Email

I have read and agree to the following:
Online Terms and Conditions
eSignature
eTransmissions
Two-Factor authentication.

I would like to receive information about Lincoln products and services through email. [Privacy Policy](#)

REGISTER

©2025 Lincoln National Corporation

[LincolnFinancial.com](#)

Lincoln Financial is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

LCN-6821875-072324

POD 2/25 202

Order code: GP-LRIEF-FLI001



It's easy to manage your benefits online!

Log in at [LincolnFinancial.com](#)

Or, with the same credentials, you can access the **Lincoln Financial**

Mobile app. Download it from the Apple and Google app stores today!



Note: For the best user experience on LincolnFinancial.com, we recommend using Google Chrome.





Your tomorrow.
Our priority.SM

©2024 Lincoln National Corporation

LincolnFinancial.com

Lincoln Financial is the marketing name for Lincoln National Corporation and its affiliates.

Affiliates are separately responsible for their own financial and contractual obligations.

LCN-7083201-100224

PDF 10/24 **Z03**

Order code: EED-ENRBC-CVR001

Insurance products are issued by The Lincoln National Life Insurance Company (Fort Wayne, IN), which does not solicit business in New York, nor is it licensed to do so. In New York, insurance products are issued by Lincoln Life & Annuity Company of New York (Syracuse, NY). Both are Lincoln Financial companies. Product availability and/or features may vary by state. Limitations and exclusions apply.